

Comparison of the current year property tax levy to the proposed property tax levy.

3.80%	2.90%
	2.90%

Unit Type:	Homecroft Civil Town
Unit Name:	4930764
Unit Code:	

[illegible]

ID YEAR CO TYPE KEY

BUDGET ESTIMATE FOR

0101 General
 (Office, Board, Commission, Department, Institution or Fund)

Homecroft Civil Town
 (If City, Town or Fire Protection District Budget, Enter Name)

Marion
 (If County Budget, Enter County Name)

For Calendar Year 2011

		Items	Total Estimate	Approved
1	PERSONAL SERVICES			
	Salaries and Wages			
	10	Council Members		
	11	Clerk Treasurer	11500	
	12	Marshall	10000	
	13	Attorney	12000	
	14	Engineer	6000	
			5000	
			44500	0
	Employee Benefits			
	20	FICA	2500	
			0	
			2500	0
	Other Personal Services			
		0		
			0	0
Total Personal Services			47000	0
2	SUPPLIES			
	Office Supplies			
	10	Records	1500	
	20	Stationary/Printing	3500	
			5000	0
	Operating Supplies			
	30	Computer Supplies	4000	
			4000	0
	Repair and Maintenance Supplies			
			0	0
	Other Supplies			
	40	Miscellaneous	4000	
			4000	0
Total Supplies			13000	0

		Items	Total Estimate	Approved
3	OTHER SERVICES AND CHARGES			
	Professional Services			
	10 Legal	8000		
	11 Engineering	5000		
			13000	0
	Communication and Transportation			
	20 Postage/PO Box	1000		
	21 Telephone	3000		
			4000	0
	Printing and Advertising			
	30 Legal Advertising	500		
			500	0
	Insurance			
	40 Bonds	2000		
	41 General/Liability	13500		
			15500	0
	Utility Services			
			0	0
	Repairs and Maintenance			
	60 Equipment	7500		
	61 Sewers	7800		
			15300	0
	Rentals			
			0	0
	Debt Service			
			0	0
	Other Services and Charges			
	90 Police Services	50000		
	91			
	92 Promotional	3000		
	93 Miscellaneous	4000		
			57000	0
Total Other Services and Charges			105300	0

4 CAPITAL OUTLAYS		Items	Total Estimate	Approved
Land				
			0	0
Buildings				
			0	0
Improvements Other Than Building				
			0	0
Machinery and Equipment				
			0	0
Other Capital Outlays				
50 Signs		3000		
			3000	0
Total Capital Outlays			3000	0
TOTAL BUDGET ESTIMATE			44000	0

(Name of Office, Board, Commission, Department, Institution or Fund)

Dated this _____ day of _____, 20____.

Signature and Title of Officer(s) or Department Head

ID YEAR CO TYPE KEY

BUDGET ESTIMATE FOR

0706 LR&S

(Office, Board, Commission, Department, Institution or Fund)

Homecroft Civil Town

Marion

(If City, Town or Fire Protection District Budget, Enter Name)

(If County Budget, Enter County Name)

For Calendar Year

		Items	Total Estimate	Approved
1 PERSONAL SERVICES	Salaries and Wages			
Employee Benefits			0	0
Other Personal Services			0	0
Total Personal Services			0	0
			0	0
			0	0
2 SUPPLIES	Office Supplies			
	40 Miscellaneous	1000		
Operating Supplies			1000	0
Repair and Maintenance Supplies			0	0
Other Supplies			0	0
Total Supplies			0	0
			1000	0

		Items	Total Estimate	Approved
3 OTHER SERVICES AND CHARGES Professional Services				
			0	0
Communication and Transportation				
			0	0
Printing and Advertising				
			0	0
Insurance				
			0	0
Utility Services 50 Street Lights		12600		
			12600	0
Repairs and Maintenance 60 Street Repair & Maintenance		4444		
			4444	0
Rentals				
			0	0
Debt Service				
			0	0
Other Services and Charges				
			0	0
Total Other Services and Charges			0	0
			17044	0

4 CAPITAL OUTLAYS		Items	Total Estimate	Approved
Land				
			0	0
Buildings				
			0	0
Improvements Other Than Building				
			0	0
Machinery and Equipment				
			0	0
Other Capital Outlays				
			0	0
50 Signs		3000		
			3000	0
Total Capital Outlays			3000	0
TOTAL BUDGET ESTIMATE			3000	0
			21044	0

(I) (We) hereby certify that the foregoing is a true and fair estimate of the necessary expense of the _____

(Name of Office, Board, Commission, Department, Institution or Fund)

for the calendar year _____ for the purposes therein specified.

Dated this _____ day of _____, 20____.

Signature and Title of Officer(s) or Department Head

ID YEAR CO TYPE KEY

BUDGET ESTIMATE FOR

LECE

(Office, Board, Commission, Department, Institution or Fund)

Homecroft Civil Town

(If City, Town or Fire Protection District Budget, Enter Name)

Marion

(If County Budget, Enter County Name)

For Calendar Year

	Items	Total Estimate	Approved
1 PERSONAL SERVICES	Salaries and Wages		
Employee Benefits		0	0
Other Personal Services		0	0
Total Personal Services		0	0
		0	0
2 SUPPLIES	Office Supplies		
Operating Supplies		0	0
Repair and Maintenance Supplies		0	0
Other Supplies		0	0
Total Supplies		0	0
		0	0

	Items	Total Estimate	Approved
3 OTHER SERVICES AND CHARGES Professional Services			
Communication and Transportation		0	0
Printing and Advertising		0	0
Insurance		0	0
Utility Services		0	0
Repairs and Maintenance		0	0
Rentals		0	0
Debt Service		0	0
Other Services and Charges 90 Law Enforcement Education	2000	0	0
Total Other Services and Charges		2000	0
		2000	0

4 CAPITAL OUTLAYS		Items	Total Estimate	Approved
Land				
			0	0
Buildings				
			0	0
Improvements Other Than Building				
			0	0
Machinery and Equipment				
			0	0
Other Capital Outlays				
			0	0
Total Capital Outlays			0	0
TOTAL BUDGET ESTIMATE			0	0
			2000	0

(I) (We) hereby certify that the foregoing is a true and fair estimate of the necessary expense of the _____

(Name of Office, Board, Commission, Department, Institution or Fund)

for the calendar year _____ for the purposes therein specified.

Dated this _____ day of _____, 20____.

Signature and Title of Officer(s) or Department Head

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BUDGET ESTIMATE FOR

1170 Public Safety LOIT

(Office, Board, Commission, Department, Institution or Fund)

Homecroft Civil Town

Marion

(If City, Town or Fire Protection District Budget, Enter Name)

(If County Budget, Enter County Name)

For Calendar Year

	Items	Total Estimate	Approved
1 PERSONAL SERVICES			
		0	0
Employee Benefits			
	0		
		0	0
Other Personal Services			
	0		
		0	0
Total Personal Services		0	0
2 SUPPLIES			
			0
Operating Supplies			
		0	0
Repair and Maintenance Supplies			
		0	0
Other Supplies			
		0	0
Total Supplies		0	0

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4 CAPITAL OUTLAYS		Items	Total Estimate	Approved
Land				
			0	0
Buildings				
			0	0
Improvements Other Than Building				
			0	0
Machinery and Equipment				
			0	0
Other Capital Outlays				
			0	0
Total Capital Outlays			0	0
TOTAL BUDGET ESTIMATE			14939	0

(I) (We) hereby certify that the foregoing is a true and fair estimate of the necessary expense of the _____

(Name of Office, Board, Commission, Department, Institution or Fund)

for the calendar year _____ for the purposes therein specified.

Dated this _____ day of _____, 20____.

Signature and Title of Officer(s) or Department Head

ID YEAR CO TYPE KEY

BUDGET ESTIMATE - FINANCIAL STATEMENT - PROPOSED TAX RATE

TAXING UNIT Homecroft Civil Town
FUND General

COUNTY Marion

NET ASSESSED VALUATION 17,697,000

(This form is to be prepared for each fund that requires either a tax rate or an appropriation)
(NOT TO BE PUBLISHED)

FUNDS REQUIRED FOR EXPENSES TO DECEMBER 31st OF INCOMING YEAR	AMOUNT USED TO COMPUTE PUBLISHED BUDGET	APPROPRIATING BODY	TAX ADJUSTMENT BOARD
1. Total budget estimate for incoming year	172,410		
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	11,144		
3. Additional appropriation necessary to be made July 1 to December 31 of present year	0		
4. Outstanding temporary loans			
a. To be paid not included in lines 2 or 3			
b. Not repaid by December 31 of present year	0		
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	183,554		
FUNDS ON HAND TO BE RECEIVED FROM SOURCES OTHER THAN PROPOSED TAX LEVY			
6. Actual cash balance, June 30 of present year (including cash investments)	39,598		
7. Taxes to be collected, present year (December settlement)	31,544		
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year (Schedule on File)			
a. Total Column A Budget Form 2	14,760		
b. Total Column B Budget Form 2	15,925		
9. TOTAL FUNDS (Add lines 6,7,8a and 8b)	101,827		
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	81,727		
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	18,442		
12. Amount to be raised by tax levy	100,170		
13A. Property Tax Replacement Credit from Local Option Tax	0		
13B. Local Option Income Tax	10,170		
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13 from line 12)	90,000		
15. Levy Excess Fund applied to current budget	XXXXXXXX		
16. Net amount to be raised	90,000		
17. Net Tax Rate on each one hundred dollars of taxable property	0.5086		

ID YEAR CO TYPE KEY

BUDGET ESTIMATE - FINANCIAL STATEMENT - PROPOSED TAX RATE

TAXING UNIT Homecroft Civil Town
 FUND LR & S

COUNTY Marion

NET ASSESSED VALUATION 17,697,000

(This form is to be prepared for each fund that requires either a tax rate or an appropriation)
 (NOT TO BE PUBLISHED)

FUNDS REQUIRED FOR EXPENSES TO DECEMBER 31st OF INCOMING YEAR	AMOUNT USED TO COMPUTE PUBLISHED BUDGET	APPROPRIATING BODY	TAX ADJUSTM BOARD
1. Total budget estimate for incoming year	21,044		
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	26,338		
3. Additional appropriation necessary to be made July 1 to December 31 of present year	0		
4. Outstanding temporary loans			
a. To be paid not included in lines 2 or 3			
b. Not repaid by December 31 of present year	0		
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	47,382		
FUNDS ON HAND TO BE RECEIVED FROM SOURCES OTHER THAN PROPOSED TAX LEVY			
6. Actual cash balance, June 30 of present year (including cash investments)	33,270		
7. Taxes to be collected, present year (December settlement)	0		
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year (Schedule on File)			
a. Total Column A Budget Form 2	4,840		
b. Total Column B Budget Form 2	9,272		
9. TOTAL FUNDS (Add lines 6,7,8a and 8b)	47,382		
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	0		
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	0		
12. Amount to be raised by tax levy	0		
13A. Property Tax Replacement Credit from Local Option Tax	0		
13B. Local Option Income Tax	0		
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13 from line 12)	0		
15. Levy Excess Fund applied to current budget	XXXXXXXXXX		
16. Net amount to be raised	0		
17. Net Tax Rate on each one hundred dollars of taxable property	0.0000		

BUDGET ESTIMATE - FINANCIAL STATEMENT - PROPOSED TAX RATE

TAXING UNIT Homecroft Civil Town
FUND MVH

COUNTY Marion
NET ASSESSED VALUATION 17,697,000

(This form is to be prepared for each fund that requires either a tax rate or an appropriation)
(NOT TO BE PUBLISHED)

FUNDS REQUIRED FOR EXPENSES TO DECEMBER 31st OF INCOMING YEAR	AMOUNT USED TO COMPUTE PUBLISHED BUDGET	APPROPRIATING BODY	TAX ADJUSTMENT BOARD
1. Total budget estimate for incoming year	44,000		
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	38,129		
3. Additional appropriation necessary to be made July 1 to December 31 of present year	0		
4. Outstanding temporary loans			
a. To be paid not included in lines 2 or 3			
b. Not repaid by December 31 of present year	0		
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	82,129		
FUNDS ON HAND TO BE RECEIVED FROM SOURCES OTHER THAN PROPOSED TAX LEVY			
6. Actual cash balance, June 30 of present year (including cash investments)	47,304		
7. Taxes to be collected, present year (December settlement)	0		
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year (Schedule on File)			
a. Total Column A Budget Form 2	9,020		
b. Total Column B Budget Form 2	19,030		
9. TOTAL FUNDS (Add lines 6,7,8a and 8b)	75,354		
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	6,775		
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	-6,775		
12. Amount to be raised by tax levy	0		
13A. Property Tax Replacement Credit from Local Option Tax	0		
13B. Local Option Income Tax	0		
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13 from line 12)	0		
15. Levy Excess Fund applied to current budget	XXXXXXXXXX		
16. Net amount to be raised	0		
17. Net Tax Rate on each one hundred dollars of taxable property	0.0000		

ID YEAR CO TYPE KEY

BUDGET ESTIMATE - FINANCIAL STATEMENT - PROPOSED TAX RATE

TAXING UNIT Homecroft Civil Town
 FUND General

COUNTY Marion
 NET ASSESSED VALUATION 17,697,000

(This form is to be prepared for each fund that requires either a tax rate or an appropriation)
 (NOT TO BE PUBLISHED)

FUNDS REQUIRED FOR EXPENSES TO DECEMBER 31st OF INCOMING YEAR	AMOUNT USED TO COMPUTE PUBLISHED BUDGET	APPROPRIATING BODY	TAX ADJUSTMENT BOARD	CONTROL BOARD AND DLGF FINAL ACTION
1. Total budget estimate for incoming year	172,410			
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	11,144			
3. Additional appropriation necessary to be made July 1 to December 31 of present year	0			
4. Outstanding temporary loans				
a. To be paid not included in lines 2 or 3				
b. Not repaid by December 31 of present year	0			
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	183,554			
FUNDS ON HAND TO BE RECEIVED FROM SOURCES OTHER THAN PROPOSED TAX LEVY				
6. Actual cash balance, June 30 of present year (including cash investments)	39,598			
7. Taxes to be collected, present year (December settlement)	31,544			
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year				
(Schedule on File)				
a. Total Column A Budget Form 2	14,760			
b. Total Column B Budget Form 2	15,925			
9. TOTAL FUNDS (Add lines 6,7,8a and 8b)	101,827			
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	81,727			
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	18,442			
12. Amount to be raised by tax levy	100,170			
13A. Property Tax Replacement Credit from Local Option Tax	0			
13B. Local Option Income Tax	10,170			
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13 from line 12)	90,000			
15. Levy Excess Fund applied to current budget	XXXXXXXXXX			
16. Net amount to be raised	90,000			
17. Net Tax Rate on each one hundred dollars of taxable property	0.5086			

ID YEAR CO TYPE FUND

BUDGET ESTIMATE- FINANCIAL STATEMENT- PROPOSED TAX RATE

TAXING UNIT Homecroft Civil Town

COUNTY Marion

FUND LECE

NET ASSESSED VALUATION

17,697,000

(This form is to be prepared for each fund that requires either a tax rate or an appropriation)

(NOT TO BE PUBLISHED)

FUNDS REQUIRED FOR EXPENSES TO DECEMBER 31st OF INCOMING YEAR	AMOUNT USED TO COMPUTE PUBLISHED BUDGET	APPROPRIATING BODY	TAX ADJUSTMENT BOARD	DLGF FINAL ACTION
1. Total budget estimate for incoming year	0			
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	1521			
3. Additional appropriation necessary to be made July 1 to December 31 of present year				
4. Outstanding temporary loans				
a. To be paid not included in lines 2 or 3				
b. Not repaid by December 31 of present year				
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	1521			
FUNDS ON HAND TO BE RECEIVED FROM SOURCES OTHER THAN PROPOSED TAX LEVY:				
6. Actual cash balance, June 30 of present year (including cash investments)	544			
7. Taxes to be collected, present year (December settlement)				
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year				
(Schedule on File):				
a. Total Column A Budget Form 2	1000			
b. Total Column B Budget Form 2	2000			
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	3544			
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	-2023			
11. Operating balance (not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	2023			
12. Amount to be raised by tax levy (add lines 10 and 11)	0			
13. a. Property Tax Replacement Credit from Local Option Tax	0			
13. b. Property Tax Levy Freeze from LOIT	0			
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13a and 13b from line 12)	0			
15. Levy Excess Fund applied to current budget	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	
16. Net amount to be raised	0			
17. Net Tax Rate on each one hundred dollars of taxable property	0			

4925 S. Shelby St. Perry Twp.

BUDGET ESTIMATE

Net Assessed Valuation

[illegible]

William
(County Auditor, City Controller, CI

4925 S. Shelby St. Perry Twp. Govt. Ctr.

BUDGET ESTIMATE

Net Assessed Valuation 17,697,000

[illegible]

(County Auditor, City Controller, Clerk-Treasurer or Fire Protection District)